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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

Declaration
Submitted
With Initial
Filing*OR*Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Att r n y D cket Numb r

2003-0066.02

First Named Inventor

Barry R. Cavill

COMPLETE IF KNOWN

Application Number

Filing Date

July 9, 2003

Art Unit

Examiner Name

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Wireless Facsimile Adapter And System For Printer And All-In-One Devices And Methods Using The
Same**

(Title of the Invention)

the specification of which



is attached hereto

OR

was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Pri r Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attach d?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

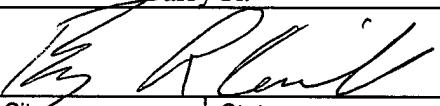
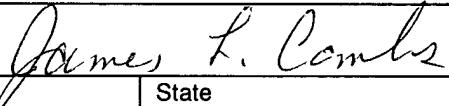
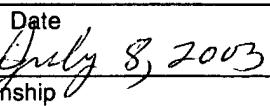
 Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

This collection of information is required by 37 CFR 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: C mmissi n r f r Pat nts, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	21972	<i>OR</i>	<input type="checkbox"/> Correspondence address below
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) Barry R.			
Inventor's Signature		Family Name or Surname Cavill 			
Residence: City Lexington		State KY		Country Citizenship U.S.	
Mailing Address 3370 Tisdale Dr.					
City Lexington		State KY		ZIP 405503	
Country					
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor Given Name (first and middle [if any]) James L.			
Inventor's Signature 		Family Name or Surname Combs 			
Residence: City Lexington		State KY		Country Citizenship U.S.	
Mailing Address 2273 Abbeywood Rd.					
City Lexington		State KY		ZIP 40515	
<input checked="" type="checkbox"/> Additional inventors or a legal representative are being named on the <u>1</u> supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.					

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental SheetPage 1 of 1

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
Francis		Foldes, Jr.	
Inventor's Signature	<i>Francis Foldes Jr.</i>		Date <i>July 8, 2003</i>
Residence: City Lexington	State KY	Country	Citizenship U.S.
Mailing Address 2225 Vinewood Rd.			
Mailing Address			
City Lexington		State KY	Zip 40515
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
William H.		Reed	
Inventor's Signature	<i>William H. Reed</i>		Date <i>7-8-03</i>
Residence: City Lexington	State KY	Country	Citizenship 40503
Mailing Address 771 Longwood Rd.			
Mailing Address			
City Lexington		State KY	Zip 40503
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)		Family Name or Surname	
John D.		Zbrozek	
Inventor's Signature	<i>John D. Zbrozek</i>		Date <i>July 8, 2003</i>
Residence: City Lexington	State KY	Country	Citizenship U.S.
Mailing Address 902 Granville Ct.			
Mailing Address			
City Lexington		State KY	Zip 40503

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Numbr	
Filing Dat	
First Named Inv ntor	Barry R. Cavill
Title	Wireless Facsimile Adapter and System for Printer And All-In-One Devices And Methods Using The Same
Art Unit	
Examin r Name	
Attorney Docket Number	2003-0066.02

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Zip

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I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name Francis Foldes, Jr.Signature Francis Foldes Jr.Date July 8, 2003Telephone 859-825-4019

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

*Total of 5 forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commis in r for Patents, P.O. B x 1450, Al xandria, VA 22313-1450.

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Filing Date	
First Named Inventor	Barry R. Cavill
Title	Wireless Facsimile Adapter and System for Printer And All-In-One Devices And Methods Using The Same
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Examiner Name	
Attorney Docket Number	2003-0066.02

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I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**Name John D. ZbrozekSignature John D. ZbrozekDate July 8, 2003

Telephone

859-732-7694

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**Name William H. ReedSignature William H. ReedDate July 8, 2003Telephone 859-232-5825

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name James L. CombsSignature James CombsDate July 8, 2003Telephone 232-7535

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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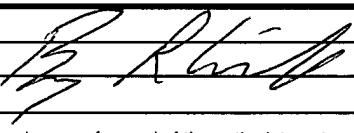
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Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**Name Barry R. CavillSignature Date July 8, 2003

Telephone

232-5613

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